RECOMMENDATIONS

NATIONAL/INTERNATIONAL WORKSHOP ON THE DISSEMINATION OF THE AMYLASE-RICH FOODS (ARF) TECHNOLOGY FOR REDUCTION OF DIETARY BULK OF YOUNG CHILD FOODS TO ADVOCACY AND USER GROUPS

The IDRC (Canada) funded Infant Foods (India) project of the Foods and Nutrition Department, Faculty of Home Science, MS University of Baroda had organized a National/International Workshop on the Dissemination of the Amylase-Rich Food (ARF) Technology for Reduction of Dietary Bulk of Young Child Foods to Advocacy and User Groups during 12-13 October, 1990.

A decade's research at the Department of Foods and Nutrition, MS University of Baroda has demonstrated that Amylase-Rich Foods (ARF), preparations made out of germinated grains, in small amounts can effectively liquify viscous gruels enabling infants (up to 24 months) to eat more. The research team has been successful in transferring this technology to the slum mothers and demonstrated its beneficial effect on child health. The main goal of the workshop was to disseminate information on this "hands-on" technology to major planning, policy making and user groups such as key personnel in the Government in India, concerned National Institutes, Voluntry Organizations, Pediatricians, various International/Bilateral Agencies and Foundations, and selected invitees from the SAARC countries. Delegates from Nepal, Sri Lanka, and Thailand could attend the Workshop. The Workshop was organized around five technical sessions, where demonstrations and discussions were emphasized more than formal lecture.

Recommendations

1. Through a decade of research and field trials, the effectivity of ARF in lowering viscosity and reduction of bulk density of cereal based weaning foods has been established. All efforts should now be geared to popularise this useful yet inexpensive technology.

2. To assure quality and safety involved in preparing and using ARF in infant foods, there is a need to sectorise the ARF manufacturing into:

(*a*) A commercial, appropriately packed ARF product for the convenience of upper income group.

(*b*) A package of ARF making technology for the do-it-yourself majority belonging to the vast middle class population.

(*c*) A package of technology of ARF making by the workers belonging to Mahila Mandals and other similar rural/urban institutions, serving the poorer section of the society in the rural and urban slums.

3. The role of Public Distribution Services requires to be explored for supply-

ing ARF to the urban consumers on a wider scale.

4. There is a need to assess the current weaning practices throughout India amongst various socio-economic groups.

5. Pilot schemes should be undertaken in different parts of India to develop ARF technology package appropriate on regional and seasonal basis.

6. Adequate network should be established to disseminate the available knowledge of ARF technology by coupling with other nutrition and health delivery systems currently in operation throughout the country.

7. Studies should explore possibilities of extending ARF technology to other specific feeding requirements, such as pregnancy, geriatric, tubal feeding, *etc.* and its possible role in dispensing nutrition in oral rehydration therapy.

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(Limited copies of the booklet entitled 'The ARF Story' are available for free distribution on first come first served basis. These can be procured from Prof. Tara Gopaldas).

—Editor

NOTES AND NEWS

Silver Jubilee Mid-Term Meeting of
INDIAN ASSOCIATION OF PEDIATRIC SURGEONS

The Indian Association of Pediatric Surgeons is holding its Silver Jubilee meeting at Calicut, Kerala from *23rd October to 26th October 1991.* For further information, please contact:

Dr. K.K. Varma,
Director and Professor of Pediatric Surgery,
Medical College,
Calicut-673 008.